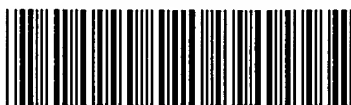


# Index of Claims



Application No.

09/543,868

Examiner

Debra F. Charles

Applicant(s)

HORNSTEIN, DAVID

Art Unit

3624

|   |          |
|---|----------|
| √ | Rejected |
| = | Allowed  |

|   |                                |
|---|--------------------------------|
| — | (Through numeral)<br>Cancelled |
| + | Restricted                     |

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| N | Non-Elected  |
| I | Interference |

|   |          |
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| A | Appeal   |
| O | Objected |

| Claim |          | Date    |  |  |  |  |  |  |  |  |  |
|-------|----------|---------|--|--|--|--|--|--|--|--|--|
| Final | Original | 5/10/05 |  |  |  |  |  |  |  |  |  |
|       | 1        | √       |  |  |  |  |  |  |  |  |  |
|       | 2        | √       |  |  |  |  |  |  |  |  |  |
|       | 3        | √       |  |  |  |  |  |  |  |  |  |
|       | 4        | √       |  |  |  |  |  |  |  |  |  |
|       | 5        | √       |  |  |  |  |  |  |  |  |  |
|       | 6        | √       |  |  |  |  |  |  |  |  |  |
|       | 7        | √       |  |  |  |  |  |  |  |  |  |
|       | 8        | √       |  |  |  |  |  |  |  |  |  |
|       | 9        | -       |  |  |  |  |  |  |  |  |  |
|       | 10       | √       |  |  |  |  |  |  |  |  |  |
|       | 11       | √       |  |  |  |  |  |  |  |  |  |
|       | 12       | √       |  |  |  |  |  |  |  |  |  |
|       | 13       | √       |  |  |  |  |  |  |  |  |  |
|       | 14       | √       |  |  |  |  |  |  |  |  |  |
|       | 15       | √       |  |  |  |  |  |  |  |  |  |
|       | 16       | √       |  |  |  |  |  |  |  |  |  |
|       | 17       | √       |  |  |  |  |  |  |  |  |  |
|       | 18       | √       |  |  |  |  |  |  |  |  |  |
|       | 19       | √       |  |  |  |  |  |  |  |  |  |
|       | 20       | √       |  |  |  |  |  |  |  |  |  |
|       | 21       | √       |  |  |  |  |  |  |  |  |  |
|       | 22       | √       |  |  |  |  |  |  |  |  |  |
|       | 23       | -       |  |  |  |  |  |  |  |  |  |
|       | 24       | √       |  |  |  |  |  |  |  |  |  |
|       | 25       | √       |  |  |  |  |  |  |  |  |  |
|       | 26       | √       |  |  |  |  |  |  |  |  |  |
|       | 27       | √       |  |  |  |  |  |  |  |  |  |
|       | 28       | √       |  |  |  |  |  |  |  |  |  |
|       | 29       | √       |  |  |  |  |  |  |  |  |  |
|       | 30       | √       |  |  |  |  |  |  |  |  |  |
|       | 31       | √       |  |  |  |  |  |  |  |  |  |
|       | 32       | √       |  |  |  |  |  |  |  |  |  |
|       | 33       | √       |  |  |  |  |  |  |  |  |  |
|       | 34       | √       |  |  |  |  |  |  |  |  |  |
|       | 35       | √       |  |  |  |  |  |  |  |  |  |
|       | 36       | √       |  |  |  |  |  |  |  |  |  |
|       | 37       | √       |  |  |  |  |  |  |  |  |  |
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| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
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|       | 82       |      |  |  |  |  |  |  |  |  |  |
|       | 83       |      |  |  |  |  |  |  |  |  |  |
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|       | 85       |      |  |  |  |  |  |  |  |  |  |
|       | 86       |      |  |  |  |  |  |  |  |  |  |
|       | 87       |      |  |  |  |  |  |  |  |  |  |
|       | 88       |      |  |  |  |  |  |  |  |  |  |
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|       | 94       |      |  |  |  |  |  |  |  |  |  |
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|       | 96       |      |  |  |  |  |  |  |  |  |  |
|       | 97       |      |  |  |  |  |  |  |  |  |  |
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| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
|       | 101      |      |  |  |  |  |  |  |  |  |  |
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|       | 105      |      |  |  |  |  |  |  |  |  |  |
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|       | 107      |      |  |  |  |  |  |  |  |  |  |
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|       | 123      |      |  |  |  |  |  |  |  |  |  |
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|       | 134      |      |  |  |  |  |  |  |  |  |  |
|       | 135      |      |  |  |  |  |  |  |  |  |  |
|       | 136      |      |  |  |  |  |  |  |  |  |  |
|       | 137      |      |  |  |  |  |  |  |  |  |  |
|       | 138      |      |  |  |  |  |  |  |  |  |  |
|       | 139      |      |  |  |  |  |  |  |  |  |  |
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|       | 141      |      |  |  |  |  |  |  |  |  |  |
|       | 142      |      |  |  |  |  |  |  |  |  |  |
|       | 143      |      |  |  |  |  |  |  |  |  |  |
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|       | 145      |      |  |  |  |  |  |  |  |  |  |
|       | 146      |      |  |  |  |  |  |  |  |  |  |
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